## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of )
ANTHONY E. BOLTON et al.
Application No.: 09/866,569
Filed: May 25, 2001
For: APOPTOTIC ENTITIES FOR USE IN TREATMENT OF ENDOTHELIUM DYSFUNCTION DISORDERS

Group Art Unit: 1614
Examiner: C. Yen
Confirmation No.: 4479

## AMENDMENT/REPLY TRANSMITTAL LETTER

Assistant Commissioner for Patents
Washington, D.C. 20231
Sir:

Enclosed is a reply for the above-identified patent application.
[X] A Petition for Extension of Time and corresponding fee of $\$ 460.00$ are also enclosed.
[ ] A Terminal Disclaimer and a check for [ ] \$55.00 (248) [ ] \$110.00 (148) to cover the requisite Government fee are also enclosed.
[X] Also enclosed is Supplemental Information Disclosure Statement
[ ] Small entity status is hereby claimed.
[ ] Applicants) request continued examination under 37 C.F.R. § 1.114 and enclose the [ ] \$370.00 (279) [ ] \$740.00 (179) fee due under 37 C.F.R. § 1.17(e).
[ ] Applicants) previously submitted __, on __, for which continued examination is requested.
[ ] Applicant(s) request suspension of action by the Office until at least _, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R.
§ 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
[ ] A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) ( $146 / 246$ ) is also enclosed.
[X] No additional claim fee is required.
[ ] An additional claim fee is required, and is calculated as shown below:

| AMENDED CLAIMS |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | No. OF <br> Claims | Highest No. Of Claims Previously PAID FOR | Extra <br> Claims | Rate | $\begin{aligned} & \text { ADDT'L } \\ & \text { FEE } \end{aligned}$ |
| Total Claims |  | MINUS = |  | $\times \$ 18.00(103)=$ |  |
| Independent Claims |  | MINUS = |  | $\times \$ 84.00(102)=$ |  |
| If Amendment adds multiple dependent claims, add \$280.00 (104) |  |  |  |  |  |
| Total Amendment Fee |  |  |  |  |  |
| If small entity status is claimed, subtract $50 \%$ of Total Amendment Fee |  |  |  |  |  |
| TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT |  |  |  |  |  |

[ ] A claim fee in the amount of \$ $\qquad$ is enclosed.
[ ] Charge \$ $\qquad$ to Deposit Account No. 02-4800.

# Amendment/Reply Transmittal Letter 

Application No. 09/866.569
Attorney's Docket No. 033136-185

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R.
$\S \S 1.16,1.17,1.20(\mathrm{~d})$ and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,
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Date: August 26, 2002

